

What is claimed is:

1. A method for treating a condition of a patient's airway wherein said condition is attributed at least in part to a spacing of a tissue from opposing surfaces in said airway; said method comprising:
 - placing a tissue contractor within said tissue within an upper airway of said patient, said contractor including a static end and a tissue-engaging end;
 - securing said static end to a bony structure adjacent said tissue and securing said tissue-engaging end to said tissue and spaced from said bony structure;
 - contracting a spacing between said tissue-engaging end and bony structure.
2. A method according to claim 1 wherein said contracting includes shortening a length of said contractor between tissue-engaging end and said static end after at least partially securing said tissue-engaging end to said tissue.
3. A method according to claim 2 wherein said shortening includes pulling on said contractor near said bony structure and securing said contractor to said bony structure at said static end with said tissue under tension.
4. A method according to claim 2 wherein said shortening includes securing said contractor to said bony structure at said static end and then contracting a spacing between said tissue-engaging end and said static end to create a tension in said tissue.
5. A method according to claim 4 wherein said contractor includes a tensioning member between said static end and said tissue-engaging end with said tensioning member retained in a stretched state by a bio-resorbable member selected to resorb after placement of said contractor in said tissue.
6. A method according to claim 1 wherein said tissue is a soft palate of said patient and said bony structure is a hard palate of said patient.

7. A method according to claim 1 wherein said tissue is a tongue of said patient and said bony structure is a jaw of said patient.
8. A method according to claim 1 wherein said condition is snoring.
9. A method according to claim 1 wherein said condition is sleep apnea.
10. An apparatus for treating a condition of a patient's airway wherein said condition is attributed at least in part by a spacing of a tissue from opposing surfaces in said airway; said apparatus comprising:
 - a tissue contractor dimensioned so as to be placed within said tissue within an upper airway of said patient, said contractor including a static end and a tissue-engaging end;
 - said static end adapted to be secured to a bony structure adjacent said tissue;
 - said tissue-engaging end adapted to secure to said tissue;
 - said contractor adapted to contract a spacing between said tissue-engaging end and said bony structure.
11. An apparatus according to claim 10 comprising an attachment for securing said static end to said bony structure after pulling on said contractor near said bony structure and securing said contractor to said bony structure at said static end with said tissue under tension.
12. An apparatus according to claim 10 wherein said contractor has a spacing between said tissue-engaging end and said static end which is reducible after said tissue-engaging end is secured to said tissue to create a tension in said tissue.
13. An apparatus according to claim 12 wherein said contractor includes a tensioning member between said static end and said tissue-engaging end with said tensioning member retained in a stretched state by a bio-resorbable member selected to resorb after placement of said contractor in said tissue.

14. An apparatus according to claim 10 wherein said tissue is a soft palate of said patient and said bony structure is a hard palate of said patient.
15. An apparatus according to claim 10 wherein said tissue is a tongue of said patient and said bony structure is a jaw of said patient.
16. An apparatus according to claim 10 wherein said condition is snoring.
17. An apparatus according to claim 10 wherein said condition is sleep apnea.
18. A method for treating a condition of a patient's airway wherein said condition is attributed at least in part to a spacing of a base of a tongue from opposing surfaces of a pharyngeal wall of said airway; said method comprising:
placing a tissue contractor within said tongue in close proximity to said base of said tongue, said contractor selected to induce a contracting fibrosis to a material of said contractor.
19. A method for treating a condition of a patient's airway wherein said condition is attributed at least in part to a spacing of a base of a tongue from opposing surfaces of a pharyngeal wall of said airway; said method comprising:
placing an implant within said tongue in close proximity to said base of said tongue, said implant have a relaxed shape and an implanted shape and having tissue in-growth areas;
implanting said implant for tissue to fix to said implant at a plurality of points and reshape said tongue base after re-shaping of said implant to said rest shape.

20. A method for treating a condition of a patient's airway wherein said condition is attributed at least in part to a spacing of a base of a tongue from opposing surfaces of a pharyngeal wall of said airway; said method comprising:

placing a tissue contractor within said tongue with a contracting axis of said contractor aligned with an axis of a genioglossus muscle.